

PROJECT 10073 RECORD

1. DATE - TIME GROUP 25 August 65 26/0220Z	2. LOCATION Washington Township, Ohio
3. SOURCE Civilian	10. CONCLUSION SATELLITE
4. NUMBER OF OBJECTS One	ECHO & PEGASUS schedules checked Negative. Object presents visual characteristics of a Satellite observation.
5. LENGTH OF OBSERVATION 1 Minute, 30 Seconds	11. BRIEF SUMMARY AND ANALYSIS Small whitich object like a star in flight. Observed for 1 minute and 30 seconds. Direction not reported. Disappeared by fading.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE Not Reported	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One)

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One)

- a. Solid
- b. Transparency
- c. Vapour
- d. As a liquid
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle one)

11.1 Compare brightness to some common objects

12. The edges of the object were

(Circle One) a. Fuzzy or blurred
b. Like a bright star
c. Sharply outlined
d. Don't remember

e. Other

13. Did the subject

- a. Appear to stand still at any time?
- b. Suddenly speed up and rush away at any time?
- c. Break up into parts or explode?
- d. Give off smoke?
- e. Change brightness?
- f. Change shape?
- g. Flash or flicker?
- h. Disappear and reappear?

(Circle One for each question)

Yes	No	Don't know
Yes	No	Don't know
Yes	<u>No</u>	Don't know
Yes	No	Don't know
Yes	<u>No</u>	Don't know
Yes	No	Don't know
Yes	No	Don't know
Yes	No	Don't know

14. Did the object disappear while you were watching it? If so, how?

15. Did the object move behind something at any time, particularly a cloud?

(Circle One): Yes No Don't Know. IF you answered YES, then tell what it moved behind:

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One): Yes No Don't Know. IF you answered YES, then tell what it moved in front of:

17. Tell in a few words the following things about the object:

a. Sound *hiss*

b. Color *dark blue*

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

1/2

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving.

N/t

20. Do you think you can estimate the speed of the object?

(Circle One) Yes No

IF you answered YES, then what speed would you estimate? _____

21. Do you think you can estimate how far away from you the object was?

(Circle One) Yes No

IF you answered YES, then how far away would you say it was? _____

22. Where were you located when you saw the object?
(Circle One):

- a. Inside a building
- b. In a car
- c. Outdoors
- d. In an airplane (type)
- e. At sea
- f. Other _____

23. Were you (Circle One)

- a. In the business section of a city?
- b. In the residential section of a city?
- c. In open countryside?
- d. Near an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other _____

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One) *NE*

- a. North
- b. Northeast
- c. East
- d. Southeast
- e. South
- f. Southwest
- g. West
- h. Northwest

24.2 How fast were you moving? _____ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

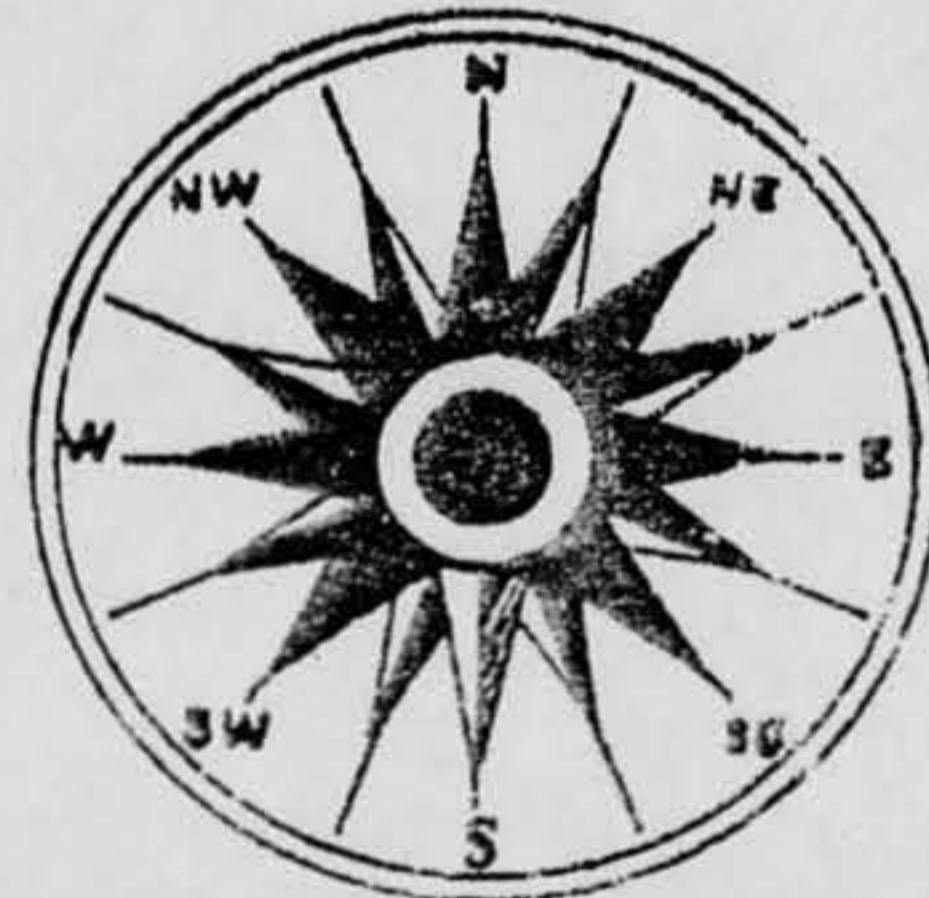
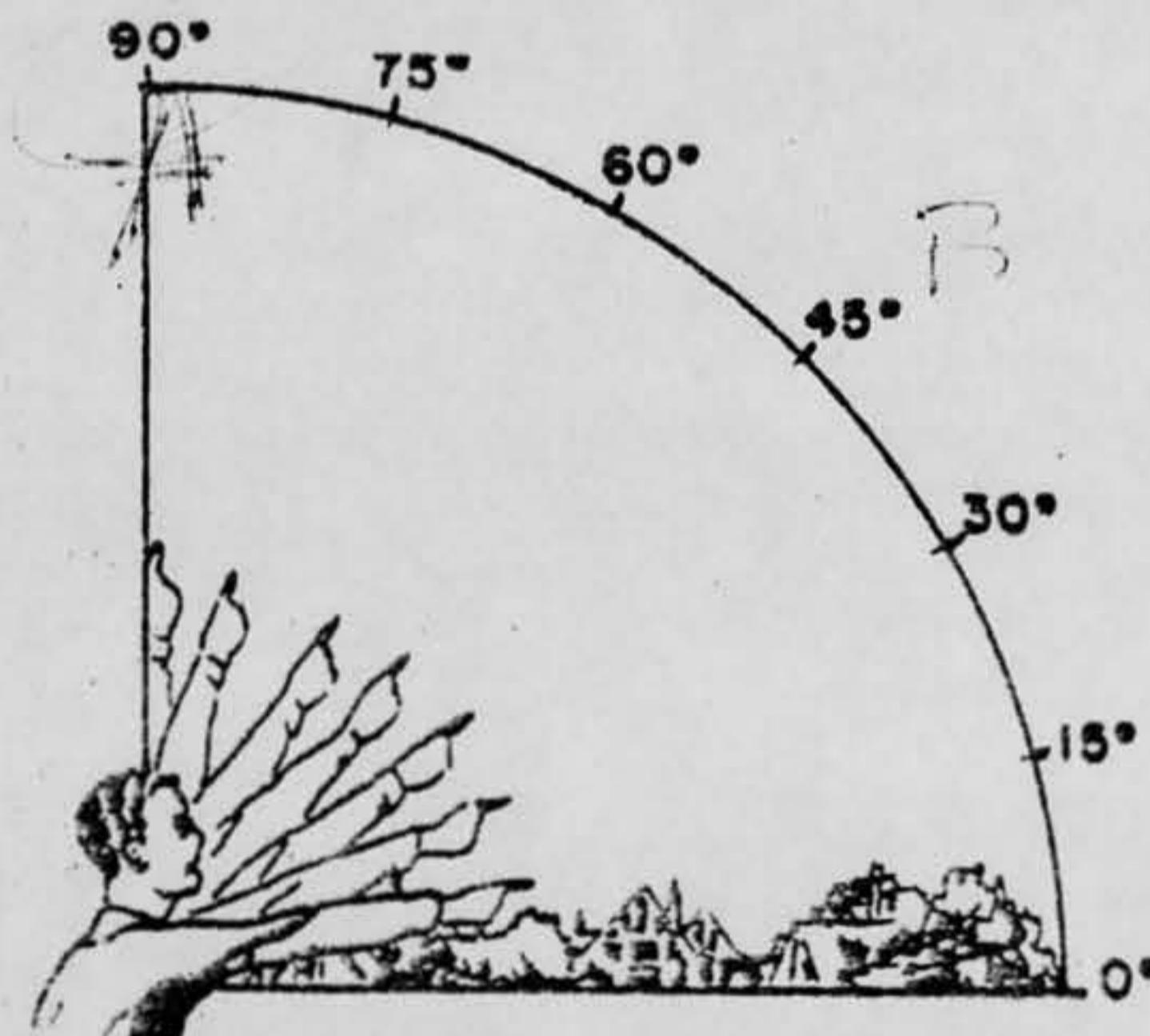
(Circle One) Yes No

25. Did you observe the object through any of the following?

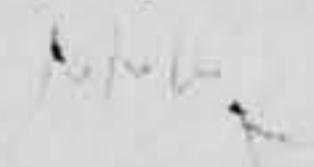
a. Eyeglasses	Yes	<input checked="" type="radio"/> No	e. Binoculars	Yes	<input checked="" type="radio"/> No
b. Sun glasses	Yes	<input checked="" type="radio"/> No	f. Telescope	Yes	<input checked="" type="radio"/> No
c. Windshield	Yes	<input checked="" type="radio"/> No	g. Theodolite	Yes	<input checked="" type="radio"/> No
d. Window glass	Yes	<input checked="" type="radio"/> No	h. Other _____		

26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you first saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you last saw it. Place an "A" on the compass when you first saw it. Place a "B" on the compass where you last saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.



29. IF there was MORE THAN ONE object, then how many were there? 1

Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

NO

31. Was anyone else with you at the time you saw the object? (Circle One)

Yes No

31.1 IF you answered YES, did they see the object too? (Circle One)

Yes No

31.2 Please list their names and addresses:

[REDACTED]

4th Flr

[REDACTED]

1st Flr

32. Please give the following information about yourself:

NAME

Last Name

First Name

Middle Name

ADDRESS

Street

City

Zone

State

TELEPHONE NUMBER

AGE

SEX

Indicate any additional information about yourself, including any special experience, which might be pertinent.

33. When and to whom did you report that you had seen the object?

Day

Month

Year

34. Date you completed this questionnaire:

Day

Month

Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

Watched ~~500~~ 400 m. shuttle.

25 Aug

Signature

U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object?	2. Time of day:	Hour	Minutes
25 Day	Aug Month	15 Year	(Circle One): A.M. or <input checked="" type="radio"/> P.M.
3. Time Zone:		(Circle One): a. Daylight Saving b. Standard	
(Circle One): a. Eastern b. Central c. Mountain d. Pacific e. Other			
4. Where were you when you saw the object?			
Nearest Postal Address:		City or Town:	State or County:
5. How long was object in sight? (Total Duration)		Hours	Minutes
(a) Certain (b) Fairly certain		(c) Not very sure (d) Just a guess	
5.1 How was time in sight determined?			
5.2 Was object in sight continuously? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
6. What was the condition of the sky?			
DAY		NIGHT	
(a) Bright (b) Cloudy		(a) Bright (b) Cloudy	
7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?			
(Circle One): a. In front of you b. In back of you c. To your right		d. To your left e. Overhead f. Don't remember	

8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

Star = 1

12. The edges of the object were:

(Circle One):

- a. Fuzzy or blurred
- b. Like a bright star
- c. Sharply outlined
- d. Don't remember

- a. Other _____
- _____
- _____
- _____

13. Did the object:

(Circle One for each question)

a. Appear to stand still at any time?	Yes	No	Don't know
b. Suddenly speed up and rush away at any time?	Yes	No	Don't know
c. Break up into parts or explode?	Yes	No	Don't know
d. Give off smoke?	Yes	No	Don't know
e. Change brightness?	Yes	No	Don't know
f. Change shape?	Yes	No	Don't know
g. Flash or flicker?	Yes	No	Don't know
h. Disappear and reappear?	Yes	No	Don't know

14. Did the object disappear while you were watching it? If so, how?

Find out

15. Did the object move behind something at any time, particularly a cloud?

(Circle One): Yes No Don't Know. IF you answered YES, then tell what it moved behind:

Cloud

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One): Yes No Don't Know. IF you answered YES, then tell what it moved in front of:

Cloud

17. Tell in a few words the following things about the object:

a. Sound

b. Color

Cloud

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

Cloud

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails.

Place an arrow beside the drawing to show the direction the object was moving.

20. Do you think you can estimate the speed of the object?

(Circle One) Yes No

IF you answered YES, then what speed would you estimate? _____

21. Do you think you can estimate how far away from you the object was?

(Circle One) Yes No

IF you answered YES, then how far away would you say it was? _____

22. Where were you located when you saw the object?

(Circle One):

- a. Inside a building
- b. In a car
- c. Outdoors
- d. In an airplane (type)
- e. At sea
- f. Other _____

23. Were you (Circle One)

- a. In the business section of a city?
- b. In the residential section of a city?
- c. In open countryside?
- d. Near an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other _____

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

- a. North
- b. Northeast
- c. East
- d. Southeast
- e. South
- f. Southwest
- g. West
- h. Northwest

24.2 How fast were you moving? _____ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One) Yes No

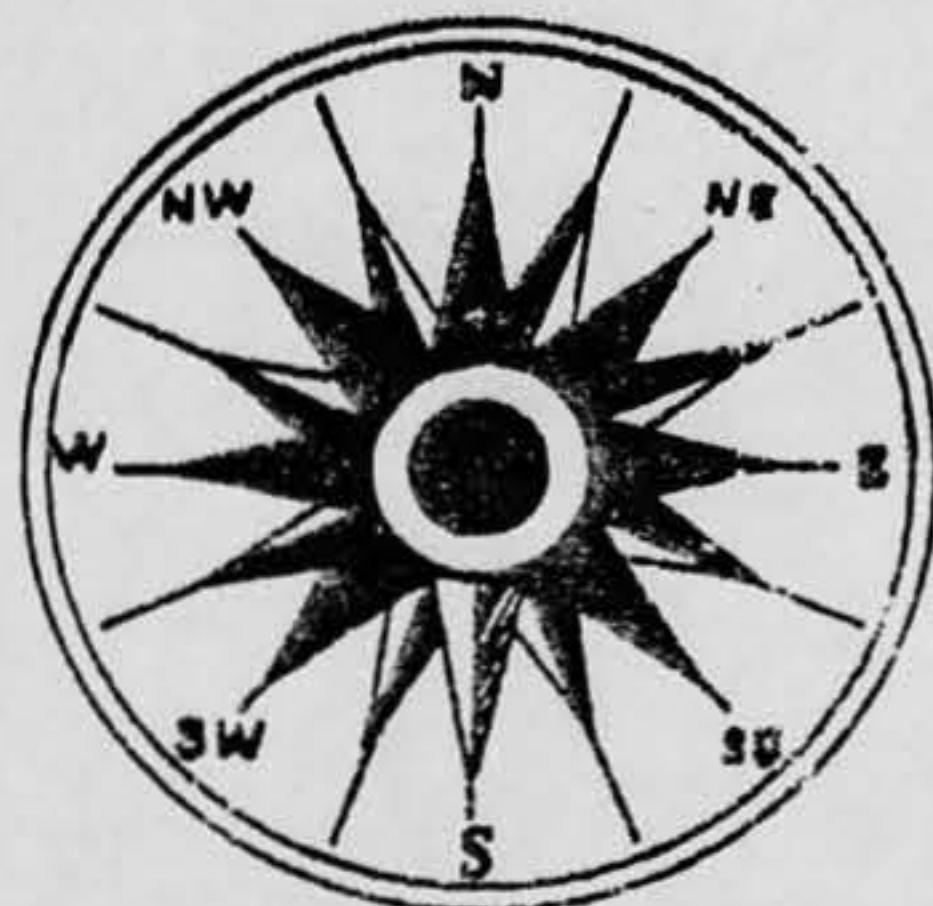
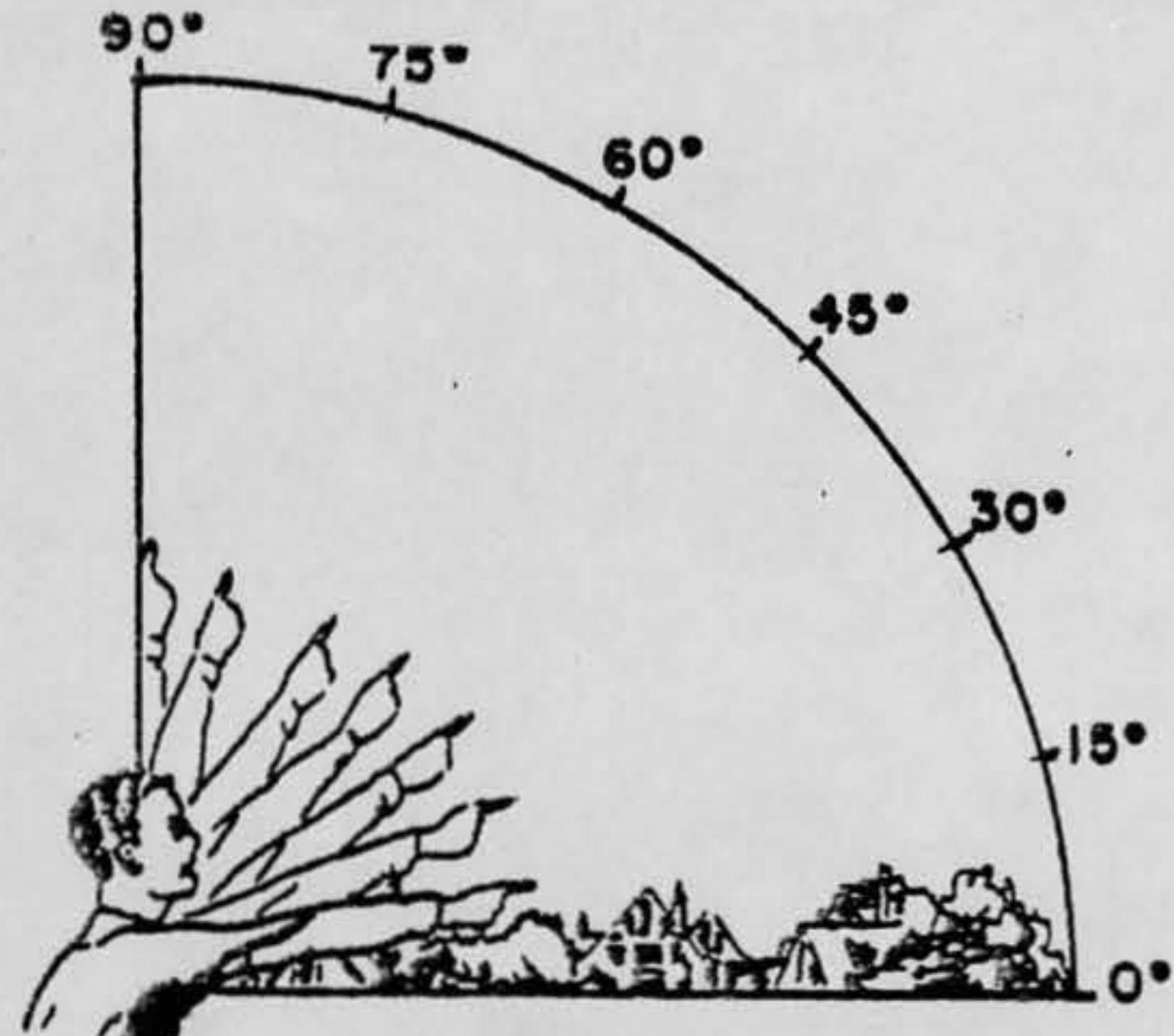
25. Did you observe the object through any of the following?

a. Eyeglasses	Yes	No	e. Binoculars	Yes	No
b. Sun glasses	Yes	No	f. Telescope	Yes	No
c. Windshield	Yes	No	g. Theodolite	Yes	No
d. Window glass	Yes	No	h. Other _____		

26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

5-22-61

27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you first saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you last saw it. Place an "A" on the compass when you first saw it. Place a "B" on the compass where you last saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.

29. IF there was MORE THAN ONE object, then how many were there? _____

Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

31. Was anyone else with you at the time you saw the object? (Circle One) Yes No

31.1 IF you answered YES, did they see the object too? (Circle One) Yes No

31.2 Please list their names and addresses:

Mr. + Mrs. [REDACTED]
[REDACTED]

32. Please give the following information about yourself:

NAME _____ Last Name _____ First Name _____ Middle Name _____

ADDRESS _____ Street _____ City _____ Zone _____ State _____

TELEPHONE NUMBER _____ AGE _____ SEX _____

Indicate any additional information about yourself, including any special experience, which might be pertinent.

33. When and to whom did you report that you had seen the object?

Day _____ Month _____ Year _____

PROJECT 10073 RECORD

1. DATE - TIME GROUP	2. LOCATION
28 August 65 29/0230Z	Washington Township, Ohio
3. SOURCE	10. CONCLUSION
Civilian	Satellite (ECHO II)
4. NUMBER OF OBJECTS	ECHO II over the area at 928PM at 70 deg elevation in flight to the NE.
5. LENGTH OF OBSERVATION	10 Minutes
6. TYPE OF OBSERVATION	Ground-Visual
7. COURSE	Object that looked like a Satellite, like a bright star but slightly brighter. White. Observed in flight from over head to 45 deg elevation in NNE.
8. PHOTOS	Possible error in reporting direction. ECHO over the area at the exact time of the report. ECHO II not reported therefore it is assumed that the Satellite was the object observed and the direction of flight as reported was in error.
9. PHYSICAL EVIDENCE	

RECEIVED

28 JUN

SP-TECH.

28 JUN 1960

U. S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

2. Time of day: 7:21 30

Hour Minutes

26

July

65

Day

Month

Year

(Circle One): A.M. or P.M.

3. Time Zone:

1. Mountain, 2. Eastern
3. Central, 4. Pacific
5. Other

(Circle One): a. Daylight Saving
b. Standard

4. Where were you when you saw the object?

Los Angeles

City or Town

California

State or Country

5. How long was object in sight? (More Questions)

Hours Minutes Seconds

Certain

a. Not very sure

Entire duration

b. Just a guess

6.1 How was object's light terminated?

DAYLIGHTS

6.2 Was object in sight continuously?

Yes No

7. What was the condition of the sky?

DAY

NIGHT

a. Bright
b. Cloudy

a. Bright
b. Cloudy

7. If you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

(Circle One): a. In front of you
b. In back of you
c. To your right

d. To your left
e. Overhead
f. Don't remember